

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	80	71056	3-16-00
O.I.P.E. CLASSIFIER		59	323
FORMALITY REVIEW		61001	5-10-00
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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Claim	Date
Final Original	
1	8/4/00
2	8/4/00
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Claim	Date
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If more than 150 claims or 10 actions  
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